## Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

2003912087US

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |   |   |                                  |                                |                             |  |            | SMALL ENTITY TYPE OF |                        |    | OTHER THAN SMALL ENTITY |                        |
|--|---|---|----------------------------------|--------------------------------|-----------------------------|--|------------|----------------------|------------------------|----|-------------------------|------------------------|
| TOTAL CLAIMS   |   |   | 45                               |                                |                             |  | I          | RATE                 | FEE                    |    | RATE                    | FEE                    |
| FOR  |   |   | NUMBER FILED                     |                                | NUMBER EXTRA                |  |            | BASIC FEE            | 385.00                 | OR | BASIC FEE               | 770.00                 |
| TOTAL CHARGEABLE CLAIMS  |   |   | 4 Smir                           | us 20=                         | *28                         |  |            | X\$ 9=               |                        | OR | X\$18=                  | 450                    |
| INC  | EPENDENT CL   | AIMS                                      | 5 mi                             | nus 3 =                        | *2                          |  |            | X43=                 |                        | OR | X86=                    | 172                    |
| ML   | ILTIPLE DEPEN                                       | DENT CLAIM P                              | RESENT                           |                                |                             |  |            | +145=                |                        | OR | +290=                   |                        |
| * If   | the difference                                      | in column 1 is                            | less than ze                     | ero, enter                     | "0" in c                    | olumn 2                                      |            | TOTAL                |                        | OR | TOTAL                   | 1392                   |
| CLAIMS AS AMENDED - PART II  |   |   |                                  |                                |                             |  |            | •                    |                        |    | OTHER                   | 1                      |
|  |   | (Column 1)                                |                                  | (Colur                         |                             | (Column 3)                                   |            | SMALL E              | NTITY                  | OR | SMALL                   |                        |
| AMENDMENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                  | HIGH<br>NUMI<br>PREVIC<br>PAID | BER<br>DUSLY                | PRESENT<br>EXTRA                             |            | RATE                 | ADDI-<br>TIONAL<br>FEE |    | RATE                    | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus                            | **                             |                             | =  |            | X\$ 9=               |                        | OR | X\$18=                  |                        |
|  | Independent   | *   | Minus                            | ***                            | - CLAINA                    | =  |            | X43=                 |                        | OR | X86=                    |                        |
| L  | FIRST PRESE   | NTATION OF M                              | JUI IPLE DEF                     | PENDENT                        | CLAIM                       |  | <u>ا</u> ا | +145=                |                        | OR | +290=                   |                        |
|  | TOTAL   |   |                                  |                                |                             |  |            |                      |                        |    | TOTAL<br>ADDIT. FEE     |                        |
|  |   | ,   | ADDIT. FEE                       |                                | OR                          | ADDII. FEE                                   |            |                      |                        |    |                         |                        |
|  |   | (Column 1)<br>CLAIMS                      | T T                              | (Colur<br>HIGH                 | EST                         | (Column 3)                                   | 7 (        | 1                    | ADDI-                  |    |                         | ADDI-                  |
| AMENDMENT B  |   | REMAINING<br>AFTER<br>AMENDMENT           |                                  | NUM<br>PREVIO<br>PAID          | DUSLY                       | PRESENT<br>EXTRA                             |            | RATE                 | TIONAL<br>FEE          |    | RATE                    | TIONAL<br>FEE          |
|  | Total   | *   | Minus                            | **                             |                             | =  |            | X\$ 9=               |                        | OR | X\$18=                  |                        |
|  | Independent   | *   | Minus                            | ***                            | CL AINA                     | = [-]  | ┧┃         | X43=                 |                        | OR | X86=                    |                        |
| L  | FIRST PRESE   | NTATION OF MU                             | JUIPLE DE                        | PENDENT                        | CLAIM                       |  | ] [        | +145=                | -                      | OR | +290=                   |                        |
|  | TOTAL ADDIT. FEE                                    |   |                                  |                                |                             |  |            |                      |                        |    | TOTAL<br>ADDIT. FEE     |                        |
| (Column 1) (Column 2) (Column 3)   |   |   |                                  |                                |                             |  |            |                      |                        |    |                         |                        |
| AMENDMENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                  | HIGH<br>NUM<br>PREVIO<br>PAID  | BER<br>OUSLY                | PRESENT<br>EXTRA                             |            | RATE                 | ADDI-<br>TIONAL<br>FEE |    | RATE                    | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus                            | **                             |                             | =  |            | X\$ 9=               |                        | OR | X\$18=                  |                        |
|  | Independent   | *   | Minus                            | ***                            |                             | <u>                                     </u> | <u></u>    | X43=                 |                        | OR | X86=                    |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145 |   |                                  |                                |                             |  |            | +145=                |                        | OR | +290=                   |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |   |   |                                  |                                |                             |  |            |                      |                        | ł  | TOTAL                   |                        |
| **   | If the "Highest Nu                                  | mber Previously Pa                        | aid For" IN TH<br>aid For" IN TH | IS SPACE I                     | is less that<br>is less tha | ın 20, enter "20<br>an 3, enter "3."         |            | ADDIT. FEE           |                        | OR | ADDIT. FEE              |                        |
| ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |   |                                  |                                |                             |  |            |                      |                        |    |                         |                        |